# Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 1 of 59

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Tiffany First name  J.  Middle name	First name  Middle name	
	Bring your picture identification to your meeting with the trustee.	Abbott Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have	ve		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4023		

Entered 05/10/16 15:27:22 Desc Main Page 2 of 59 Case 16-81160 Doc 1 Filed 05/10/16 Document

Case number (if known)

Debtor 1 Tiffany J. Abbott

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	648 Glidden Ave.	If Debtor 2 lives at a different address:		
DeKalb, IL 60115  Number, Street, City, State & ZIP Code  DeKalb		DeKalb, IL 60115  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 3 of 59

Case number (if known) Debtor 1 **Tiffany J. Abbott** 

ar	Tell the Court About	our B	ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	Chapter 7						
		□ CI	hapter 11					
		□ CI	hapter 12					
			hapter 13					
3.	How you will pay the fee		about how yo	the entire fee when I file my petition. Please check with the clerk's office in your local court for more detail we you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or more over attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with the deadless.				
					tallments. If you choose this options (Official Form 103A).	n, sign and attach the Application for Individuals to Pay		
			but is not req applies to you	uired to, waive y ur family size ar	your fee, and may do so only if you nd you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.		
			те яррпоанс	in to riave the C	Shapter 7 Tilling Fee Walved (Office	art offir 100b) and the it with your petition.		
Э.	Have you filed for bankruptcy within the last 8 years?	■ No						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No	)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No	Go to I	ine 12.				
	residence?	□ Ye		ur landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?		
		<u> </u>	.s.	No. Go to line	, , ,	,,,,,,,		
				Yes. Fill out In	itial Statement About an Eviction J	Judgment Against You (Form 101A) and file it with this		
				bankruptcy per	IIIIOH.			

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 4 of 59

Deb	otor 1 Tiffany J. Abbott		Docume	Case number (if known)			
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Propriet	tor			
			100 0 111 00 0 00 0 1 10 0110				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Stat	Number, Street, City, State & ZIP Code			
	it to this petition.		Check the appropriate bo	x to describe your business:			
			☐ Health Care Busing	ness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the above	<del>)</del>			
<b>Chapter 11 of the</b> deadlines. If you indicate that you are a small business debtor, you		court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure					
	For a definition of small	■ No.	I am not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have An	, Hazardous Proporty or An	y Property That Needs Immediate Attention			
	Do you own or have any		Thazardous Froperty of An	y Froperty That Needs ininiculate Attention			
14.	property that poses or is	No.					
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety?						
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
	-			Number, Street, City, State & Zip Code			

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 5 of 59

Debtor 1 Tiffany J. Abbott

Case number (if known)

# Part 5:

## Explain Your Efforts to Receive a Briefing About Credit Counseling

### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Tiffany J. Abbott		Document	Page 6 of 59 c	ase number (if know	n)	
Par		ions for Repo	rting Purposes				
	What kind of debts do you have?	16a. <b>A</b> r				1 U.S.C. § 101(8) as "incurred by an	
			No. Go to line 16b.				
		•	Yes. Go to line 17.				
			e your debts primarily business oney for a business or investment of				
			No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. Sta	ate the type of debts you owe that	are not consumer debts	or business debts		
17.	Are you filing under Chapter 7?	□ No. la	m not filing under Chapter 7. Go to	line 18.			
	Do you estimate that after any exempt property is excluded and	are	e paid that funds will be available to			excluded and administrative expenses	
	administrative expenses are paid that funds will		No				
	be available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do	<b>1</b> -49		☐ 1,000-5,000		25,001-50,000	
	you estimate that you owe?	□ 50-99		5001-10,000		50,001-100,000	
		□ 100-199 □ 200-999	L	10,001-25,000	L	More than100,000	
19.	How much do you	<b>\$</b> 0 - \$50,0		□ \$1,000,001 - \$10 milli		\$500,000,001 - \$1 billion	
	estimate your assets to be worth?	\$50,001 -	<b>4</b> 100,000	□ \$10,000,001 - \$50  m □ \$50,000,001 - \$100 n		\$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion	
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million		☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$50,0		☐ \$1,000,001 - \$10 milli		1 \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		Ψ.00,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		\$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion	
		□ \$100,001 □ \$500,001	Ţ000,000			1 More than \$50 billion	
Par	7: Sign Below						
For	you	I have exami	ned this petition, and I declare und	ler penalty of perjury tha	at the information p	provided is true and correct.	
			sen to file under Chapter 7, I am av s Code. I understand the relief ava				
			represents me and I did not pay on the represents me and I did not pay on the read the notice			orney to help me fill out this	
		I request relie	ef in accordance with the chapter o	of title 11, United States	Code, specified in	this petition.	
		bankruptcy c and 3571.				rty by fraud in connection with a r both. 18 U.S.C. §§ 152, 1341, 1519,	
		/s/ Tiffany J. A Signature of	Abbott	Signatu	re of Debtor 2		
		Executed on		Execute			
			MM / DD / YYYY		MM / DD / Y	YYYY	

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 7 of 59

Debtor 1 Tiffany J. Abbott Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeffrey A. Bivens	Date	May 9, 2016
Signature of Attorney for Debtor	_	MM / DD / YYYY
Jeffrey A. Bivens		
Printed name		
Jeffrey A. Bivens, PC		
Firm name		
4855 E. State St.		
Rockford, IL 61108		
Number, Street, City, State & ZIP Code		
(0.4 E) 0.00 0.000		
Contact phone (815) 399-2299	Email address	
Bar number & State		
Dai number a otate		

C	ase 10-01100	Doc 1 Filed 05/1		.0/10 15.27.22	Desc Main
Fill in this infor	mation to identify you	r case:			
Debtor 1	Tiffany J. Abbot	t			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Fo	orm 106Sum				, and the second

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as	ssets
		Value of	f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,250.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,250.00
Par	t 2: Summarize Your Liabilities		
		Your lia	<b>abilities</b> you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	88,215.00
	Your total liabilities	\$	88,215.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	194.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	194.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Value dabte are primarily consumer dabte. Consumer datte are those (for some date in this ideal primarily for		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Tiffany J. Abbott Document Page 9 of 59
Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$\_\_\_\_\_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

		Document	Page 10 of 59	
Fill in this inform	mation to identify yo	ur case and this filing:		
Debtor 1	Tiffany J. Abbo	ott		
	First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle Name	Lost Nama	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the	NORTHERN DISTRICT OF	ILLINOIS	
Case number				☐ Check if this is an
_				amended filing
				·
Official Ec	**** 40CA/D			
_	rm 106A/B			
Schedul	e A/B: Pro	perty		12/15
think it fits best. B information. If more Answer every ques	e as complete and acc e space is needed, atta stion.	urate as possible. If two married p	<ul> <li>If an asset fits in more than one category, list the eople are filing together, both are equally responsi on the top of any additional pages, write your name</li> <li>Own or Have an Interest In</li> </ul>	ble for supplying correct
1. Do you own or h	have any legal or equit	able interest in any residence, build	ding, land, or similar property?	
■ No. Go to Par	rt 2			
Yes. Where is				
Tes. Where it	s the property:			
Part 2: Describe	Your Vehicles			
3. Cars, vans, tro	ucks, tractors, spor	utility vehicles, motorcycles		
☐ Yes				
	•	•	vehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			es from Part 2, including any entries for	\$0.00
pages you ha	ave attached for Par	t 2. Write that number here	=>	<del></del>
	Your Personal and Ho	usehold Items uitable interest in any of the fo	llowing itoms?	Current value of the
·		ŕ	niowing items?	portion you own? Do not deduct secured claims or exemptions.
Examples: Ma □ No		s ure, linens, china, kitchenware		
Yes. Descri	ribe			
	Bed, dr	esser, table, chairs, enterta	ninment center, knick knacks	\$200.00
7. Electronics				

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 11 of 59 Case number (if known)

	i phone 5	\$50.00
8.	Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; statement of the collections, memorabilia, collectibles	amp, coin, or baseball card collections;
	■ No □ Yes. Describe	
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis musical instruments  ■ No	s; canoes and kayaks; carpentry tools;
	☐ Yes. Describe	
10.	<ul> <li>Firearms         Examples: Pistols, rifles, shotguns, ammunition, and related equipment     </li> <li>■ No</li> </ul>	
	☐ Yes. Describe	
11.	<ul> <li>Clothes         Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories         □ No     </li> </ul>	
	Yes. Describe	
	Clothing	\$200.00
	<ul> <li>Jewelry         <ul> <li>Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watche</li> <li>□ No</li> <li>■ Yes. Describe</li> </ul> </li> </ul>	_
	Jewelry	\$100.00
13.	Non-farm animals  Examples: Dogs, cats, birds, horses  No □ Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did in No	not list
	☐ Yes. Give specific information	
15	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have atta for Part 3. Write that number here	sched \$550.00
Pa	art 4: Describe Your Financial Assets	
Do	o you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	. Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file  No  Yes	your petition

Official Form 106A/B Schedule A/B: Property page 2

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Page 12 of 59
Case number (if known) Document

17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No ☐ Yes..... Institution name: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **IRA IRA** \$2,700.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own?

Debtor 1

Tiffany J. Abbott

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 13 of 59 Case number (if known)

		claims or exemptions.
20	Tay refunds awad to you	
20.	Tax refunds owed to you	
	■ No	
	☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29	Family support	
25.	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property sett	lement
	■ No	
	☐ Yes. Give specific information	
30.	Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensati	on Social Security
	benefits; unpaid loans you made to someone else	on, occiai occurry
	■ No	
	☐ Yes. Give specific information	
31.	Interests in insurance policies	
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	■ No	
	Yes. Name the insurance company of each policy and list its value.	0 1 ( 1
	Company name: Beneficiary:	Surrender or refund value:
		valuo.
32.	Any interest in property that is due you from someone who has died	
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive someone has died.	property because
	■ No	
	_ ```	
	☐ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	No	
	Yes. Describe each claim	
	Tes. Describe each daint	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set	off claims
	■ No	
	☐ Yes. Describe each claim	
35.	Any financial assets you did not already list	
	■ No	
	☐ Yes. Give specific information	
36	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached	\$2,700.00
	for Part 4. Write that number here	<del></del>
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37.	Do you own or have any legal or equitable interest in any business-related property?	
- 1	No. Go to Part 6.	
ı	☐ Yes. Go to line 38.	
Pa	rt 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.	
	If you own or have an interest in farmland, list it in Part 1.	
16	Do you own or have any legal or equitable interest in any form, or commercial fishing-related property?	
40.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	No. Go to Part 7.	
	Yes. Go to line 47.	

Debtor 1

Entered 05/10/16 15:27:22 Case 16-81160 Doc 1 Filed 05/10/16 Desc Main

Page 14 of 59
Case number (if known) Document

Debtor 1 Tiffany J. Abbott Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$0.00 Part 3: Total personal and household items, line 15 57. \$550.00 Part 4: Total financial assets, line 36 58. \$2,700.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$3,250.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

\$3,250.00

\$3,250.00

page 5 Official Form 106A/B Schedule A/B: Property

Fill in this infor	mation to identify your	case:		
Debtor 1	Tiffany J. Abbott			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse	is filing with	you.
----	--------------------	------------	---------------	----------------	-----------	-------------	----------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
Bed, dresser, table, chairs, entertainment center, knick knacks	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
i phone 5	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Elle Holli Galledale 745. 1.1			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$200.00		100%	735 ILCS 5/12-1001(a)
Line Holli Schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
IRA: IRA Line from Schedule A/B: 21.1	\$2,700.00		\$2,700.00	735 ILCS 5/12-1006
Line from Schedule A/B: Z1.1			100% of fair market value, up to any applicable statutory limit	

Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Case 16-81160 Doc 1 Document Page 16 of 59 Debtor 1 Tiffany J. Abbott Case number (if known) 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? 

No

Yes

Fill in this infor	mation to identify your	case:		
Debtor 1	Tiffany J. Abbott			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

# Official Form 106D

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

	Ou	00 10 01100 1	Docume	ent Page 18 of 59	.ZZ Best Main
Fill ir	n this inform	nation to identify your			
Debte	or 1	Tiffany J. Abbott			
D 0 0 0 1	O	First Name	Middle Name	Last Name	
Debte					
(Spous	se if, filing)	First Name	Middle Name	Last Name	
Unite	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case	number				
(if knov					☐ Check if this is an
					amended filing
∩ffi∂	rial Form	106E/F			
			/ho Have Unsecเ	red Claims	12/15
				RIORITY claims and Part 2 for creditors with NO	
Sched Sched eft. At	ule G: Execut ule D: Credito tach the Cont	ory Contracts and Unexpors Who Have Claims Sec	ired Leases (Official Form 1 ured by Property. If more sp	Also list executory contracts on Schedule A/B: 06G). Do not include any creditors with partially bace is needed, copy the Part you need, fill it out, in to report in a Part, do not file that Part. On the	secured claims that are listed in number the entries in the boxes on the
Part	1: List Al	l of Your PRIORITY Un	secured Claims		
1. D	o any credito	rs have priority unsecure	d claims against you?		
	No. Go to Pa	art 2.			
	Yes.				
Part :	2: List Al	l of Your NONPRIORIT	Y Unsecured Claims		
3. D	o any credito	rs have nonpriority unsec	cured claims against you?		
	No. You hav	re nothing to report in this p	art. Submit this form to the co	urt with your other schedules.	
	Yes.				
u th	nsecured clain	n, list the creditor separately	y for each claim. For each clai	ler of the creditor who holds each claim. If a credition listed, identify what type of claim it is. Do not list constitute that the source of the control of the control of the credition of the	laims already included in Part 1. If more
					Total claim
4.1	AT&T		Last 4 digits	s of account number	\$1,150.00
	Nonpriority	Creditor's Name			
	PO Box	-	When was the	he debt incurred?	
		IL 60572 reet City State Zlp Code	As of the da	te you file, the claim is: Check all that apply	
		red the debt? Check one.		, , , , , , , , , , , , , , , , , , , ,	
	Debtor	1 only	☐ Continger	nt	
	☐ Debtor	2 only	☐ Unliquida	ited	
	☐ Debtor	1 and Debtor 2 only	☐ Disputed		
	☐ At least	one of the debtors and and	other Type of NON	NPRIORITY unsecured claim:	
	☐ Check	if this claim is for a comi	munity	oans	
	debt			ns arising out of a separation agreement or divorce t	hat you did not
		n subject to offset?	report as pric		
	■ No			pension or profit-sharing plans, and other similar del	DIS
	☐ Yes		Other. Sp	Prior Utility Service	

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 19 of 59
Case number (if know)

4.2	AT&T	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o Enhanced Recovery P.O. Box 57547 Jacksonville, FL 32241	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice Purpose Only	
4.3	AT&T	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o Diversified Recovery P.O. Box 551268	When was the debt incurred?	
	Jacksonville, FL 32255  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice Purpose Only	
4.4	Atul Sheth MD	Last 4 digits of account number	\$450.00
	Nonpriority Creditor's Name 301 W. Dakota St.	When was the debt incurred?	·
	Spring Valley, IL 61362  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify Medical Service	

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 20 of 59
Case number (if know)

Debtor	1 Tiffany J. Abbott	Case number (if know)	
4.5	Cash Store	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name 5259 IL Rt. 251, Ste. 5	When was the debt incurred?	
	Peru, IL 61354  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.6	Cash Store	Last 4 digits of account number	\$650.00
	Nonpriority Creditor's Name 5259 IL Rt. 251, Ste. 5 Peru, IL 61354	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.7	Chase Home Finance, LLC	Last 4 digits of account number	\$60,000.00
	Nonpriority Creditor's Name 3415 Vision Dr. Columbus, OH 43219	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Foreclosure deficiency	

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 21 of 59
Case number (if know)

Debto	or 1 Tiffany J. Abbott	Case number (if know)	
4.8	Check Into Cash	Last 4 digits of account number	\$800.00
	Nonpriority Creditor's Name		*
	1002 Shooting Park	When was the debt incurred?	
	Peru, IL 61354  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	_		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.9	Citibank	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name		Ψοσοίσο
	100 Citibank Drive	When was the debt incurred?	
	San Antonio, TX 78245  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	_	
		☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card	
		Cities. Specify	
4.1	Citibank	Last 4 digits of account number	\$0.00
0	Nonpriority Creditor's Name		*
	c/o Midland Funding	When was the debt incurred?	
	8875 Aero Drive, Ste. 200		
	San Diego, CA 92123  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damins. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	<u> </u>		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Notice Purpose Only	
		Caron Opcony	

Document Page 22 of 59 Debtor 1 Tiffany J. Abbott Case number (if know) 4.1 Collection Professionals, Inc. \$2,900.00 Last 4 digits of account number Nonpriority Creditor's Name 723 - 1st St. When was the debt incurred? La Salle, IL 61301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Judgment ☐ Yes 4.1 Comcast \$325.00 Last 4 digits of account number Nonpriority Creditor's Name 2508 W. Rte. 120 When was the debt incurred? Mchenry, IL 60050 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account balance ☐ Yes 4.1 Comcast \$0.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Convergent Recovery When was the debt incurred? Outsourcing P.O. Box 9004 Renton, WA 98057 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

report as priority claims

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Notice Purpose Only

Is the claim subject to offset?

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 23 of 59

1 Tiffany J. Abbott	Case number (if know)	
Dan Abbott	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name c.o IDOC 2268 E. Morton Ave.	When was the debt incurred?	
Jacksonville, IL 62651  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify contingent creditor	
Discover	Last 4 digits of account number	\$3,200.00
Nonpriority Creditor's Name		<del>+0,200.00</del>
Greenwood Trust	When was the debt incurred?	
P.O. Box 6000		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Discover	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name		ψ0.00
PO Box 30395 Salt Lake City, UT 84130-0395	When was the debt incurred?	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other Specific Notice Purpose Only	

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 24 of 59

Discover	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name P.O. Box 689	When was the debt incurred?	
Sandy, UT 84091-0689	Then was the dest incurred.	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Notice Purpose Only	
Dr. Cote	Last 4 digits of account number	\$200.00
Nonpriority Creditor's Name		<u> </u>
710 Peoria St.	When was the debt incurred?	
Peru, IL 61354  lumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the damins. Oneok an that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
ebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Service	
r. Kunkle	Last 4 digits of account number	\$500.00
Nonpriority Creditor's Name		
723 - 10th St.	When was the debt incurred?	
Peru, IL 61354 lumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
ebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Dental Services	

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 25 of 59

Debtor 1 Tiffany J. Abbott Case number (if know) 4.2 \$500.00 Dr. O'Connell Last 4 digits of account number 0 Nonpriority Creditor's Name 206 Marquette St. When was the debt incurred? La Salle, IL 61301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Dental Service ☐ Yes 4.2 Dr. Sheth \$600.00 Last 4 digits of account number Nonpriority Creditor's Name 301 W. Dakota St. When was the debt incurred? Spring Valley, IL 61362 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Service ☐ Yes 4.2 **Home Town National Bank** \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name 105 Marquette St. #461 When was the debt incurred? La Salle, IL 61301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Automobile Deficiency ☐ Yes

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 26 of 59

Debtor 1 Tiffany J. Abbott Case number (if know) 4.2 **Illinois Valley Community Hospital** \$1,725.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 925 West St. When was the debt incurred? Peru, IL 61354 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Service ☐ Yes 4.2 **Illinois Valley Community Hospital** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Collection Professionals, Inc. When was the debt incurred? PO Box 416 La Salle, IL 61301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Purpose Only ☐ Yes 4.2 Illinois Valley ENT \$300.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 920 West St., Ste. 113 When was the debt incurred? Peru, IL 61354 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Service ☐ Yes

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 27 of 59
Case number (if know)

Debtor 1 Tiffany J. Abbott 4.2 Illinois Valley ENT \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name c/o Credit Discount When was the debt incurred? 415 E. Main St. Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Purpose Only ☐ Yes 4.2 **IVCH Fast Care** \$300.00 Last 4 digits of account number Nonpriority Creditor's Name 5307 Rt. 251 When was the debt incurred? Peru, IL 61354 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Service ☐ Yes 4.2 \$925.00 8 Last 4 digits of account number Nonpriority Creditor's Name c/o State Collection Service When was the debt incurred? P.O. Box 6250 Madison, WI 53716-0250 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Service ☐ Yes

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 28 of 59

Debtor 1 Tiffany J. Abbott Case number (if know) 4.2 Midland Funding LLC \$875.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 8875 Aero Dr., Ste. 200 When was the debt incurred? San Diego, CA 92123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Account balance ☐ Yes 4.3 **OSF Health Care** \$1,000.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 530 NE Glen Oak Ave. When was the debt incurred? Peoria, IL 61656-1712 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Service ☐ Yes 4.3 **Ottawa Medical Center** \$375.00 Last 4 digits of account number Nonpriority Creditor's Name 1614 E. Norris Drive When was the debt incurred? Ottawa, IL 61350 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Service ☐ Yes

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 29 of 59

Debtor	1 Tiffany J. Abbott	Case number (if know)	
4.3	Ottawa Township High School	Last 4 digits of account number	\$50.00
	Nonpriority Creditor's Name 211 E. Main St. Ottawa, IL 61350	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Account Balance	
4.3	Prairie State Pulmonary	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name 20303 Crawford Ave. Olympia Fields, IL 60461	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Service	
4.3	Prairie State Pulmonary	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o Merchants Credit Association 223 W. Jackson St., Ste. 900 Chicago, IL 60606	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify \_Notice Purpose Only

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 30 of 59

Debto	r 1 Tiffany J. Abbott	Case number (if know)	
4.3 5	Progressive Insurance Co.	Last 4 digits of account number	\$150.00
	Nonpriority Creditor's Name 6300 Wilson Mills Rd. Mayfield Village, OH 44143	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Insurance Premium	
4.3	Spring Valley Medical Clinic	Last 4 digits of account number	\$740.00
	Nonpriority Creditor's Name 600 E. First St Spring Valley, IL 61362	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Service	
4.3	Spring Valley Medical Clinic	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o AFNI 1310 Martin Luther King Dr.	When was the debt incurred?	
	Bloomington, IL 61702		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only		
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Notice Purpose Only	

Entered 05/10/16 15:27:22 Case 16-81160 Doc 1 Filed 05/10/16 Desc Main

Document Page 31 of 59 Debtor 1 Tiffany J. Abbott Case number (if know) 4.3 St. Elizabeth Hospital \$1,400.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1100 E. Norris Drive When was the debt incurred? Ottawa, IL 61350 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Service ☐ Yes 4.3 St. Elizabeth Hospital \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name c/o AFNI When was the debt incurred? P.O. Box 3097 **Bloomington, IL 61702** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Purpose Only ☐ Yes 4.4 St. Margarets Hospital \$300.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 600 E. First St. When was the debt incurred? Spring Valley, IL 61362 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:

Official Form 106 E/F

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify Medical Service

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Page 32 of 59 Case number (if know) Document Debtor 1 Tiffany J. Abbott

Stacy & Tim Schomer	Last 4 digits of account number	\$5,000.00
Nonpriority Creditor's Name	<del></del>	
10234 County Line Rd.	When was the debt incurred?	
Newark, IL 60541	As of the data was file the alabasis to Obsal all that each	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Former Landlord	

# Part 3: List Others to Be Notified About a Debt That You Already Listed

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 88,215.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 88,215.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		1700.11111.	111 FAUE 33 UL 33	
Fill in this infor	mation to identify your	case:		
Debtor 1	Tiffany J. Abbott			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if thi
				amended fi

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

		Document	Page 34 of	59	
Fill in this i	nformation to identify your c	ase:			
Debtor 1	Tiffany J. Abbott				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	) First Name	Middle Name	Last Name		
	•				
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS		
Case number	er				☐ Check if this is an amended filing
	Form 106H ule H: Your Code	ebtors			12/15
people are f ill it out, an our name a	iling together, both are equa d number the entries in the b and case number (if known).	lly responsible for supplying oxes on the left. Attach the Answer every question.	g correct information Additional Page to	n. If more space is ne this page. On the top	te as possible. If two married neded, copy the Additional Page, of any Additional Pages, write
1. Do y	ou have any codebtors? (If yo	ou are filing a joint case, do no	ot list either spouse as	s a codebtor.	
☐ No					
Yes					
	in the last 8 years, have you l , California, Idaho, Louisiana, I				states and territories include
■ No. 0	Go to line 3.				
☐ Yes.	Did your spouse, former spous	se, or legal equivalent live with	you at the time?		
in line 2	2 again as a codebtor only if 06D), Schedule E/F (Official I	that person is a guarantor o	r cosigner. Make su	ire you have listed the	with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill
	olumn 1: Your codebtor ame, Number, Street, City, State and ZIP	Code		Column 2: The cred Check all schedules	litor to whom you owe the debt
2:	an Abbott 268 E. Morton Ave. acksonville, IL 62650			☐ Schedule D, lin ☐ Schedule E/F, I ☐ Schedule G ☐ Collection Profes	e line

Schedule H: Your Codebtors

# Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 35 of 59

Fill	in this information to identify your o	case:									
Del	otor 1 Tiffany J. A	bbott			_						
	otor 2 buse, if filing)				_						
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		_						
	se number nown)		-			☐ An a		nt showi	ng postpetition		
O	fficial Form 106I					MM	I / DD/ Y	VVV	ŭ		
S	chedule I: Your Inc	ome				101101	1, 00, 1			12/15	
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing ware spouse is not filing ware on the top of any additi	ng jointly, and your ith you, do not inclu	spouse i	s liv natio	ing with yo	ou, inclu our spo	ıde infoi use. If n	mation about nore space is	your needed,	
1.	Fill in your employment information.		Debtor 1	Debtor 1			Debtor 2 or non-filing spouse				
	If you have more than one job,	Employment status	☐ Employed				☐ Employed				
	attach a separate page with information about additional employers.	Occupation	■ Not employed				□ Not er	nployed			
	Include part-time, seasonal, or self-employed work.	Employer's name									
	Occupation may include student or homemaker, if it applies.	Employer's address									
		How long employed t	here?								
Par	Give Details About Mo	nthly Income									
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any I	line, write \$	0 in the	space. Ir	nclude your no	n-filing	
-	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	n for all e	mplo	oyers for the	at perso	n on the	lines below. If	you need	
						For Debto	or 1		ebtor 2 or ling spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A		
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A		
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0	.00	\$_	N/A		

# Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 36 of 59

Deb	tor 1	Tiffany J. Abbott	-	Ca	se number (if kr	own)				
	Cor	by line 4 here	4.	F \$	or Debtor 1			ebtor filing s	spouse	
	COL	by line 4 here	4.	Ф		0.00	Φ		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	. \$		.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b			.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c			.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d			.00	\$		N/A	
	5e.	Insurance	5e			.00	\$		N/A	
	5f.	Domestic support obligations	5f.			0.00	\$		N/A	
	5g.	Union dues	5g			0.00			N/A	
	5h.	Other deductions. Specify:	_ 5h	•			+ \$		N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		.00	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		.00	\$		N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı. \$		0.00	\$		N/A	
	8b.	Interest and dividends	8b			0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c			0.00	\$		N/A	
	8d.		8d			0.00	\$		N/A	
	8e.	Social Security	8e	. \$		.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Food stamps	8f.			.00	\$		N/A	
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g 8h			0.00	, <u>\$</u>		N/A N/A	
	OII.	Other monthly income. Specily:	_ 011	.т ф 		.00	T Φ		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	194	.00	\$		N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	194.00	+ \$		N/A	= \$	194.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ—	134.00	.   •		IVA	$    ^{ullet} -$	134.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe		•				e <i>J.</i> +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restee that amount on the Summary of Schedules and Statistical Summary of Certaillies						12.	\$	194.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						Combine monthly	
		Van Europaine								

Official Form 106I Schedule I: Your Income page 2

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 37 of 59

Fill i	in this information to identify your case:				
Debt	otor 1 Tiffany J. Abbott		Checl	k if this is:	
Dobt	otor 2		_	An amended filing	
	ouse, if filing)				ving postpetition chapter the following date:
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILI	LINOIS	1	MM / DD / YYYY	
Case	e number				
(If kn	nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
Be a	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the nber (if known). Answer every question.				
Part	Describe Your Household Is this a joint case?				
1.	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expen</i>	ses for Separate House	ehold of Debte	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2.	•		Dependent's age	Does dependent live with you?
	Do not state the				□No
	dependents names.				☐ Yes ☐ No
					☐ Yes
					□ No
					Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
	expenses of people other than yourself and your dependents?				
Port	t 2: Estimate Your Ongoing Monthly Expenses				
Esti exp	imate your expenses as of your bankruptcy filing date unlessenses as of a date after the bankruptcy is filed. If this is a sublicable date.				
the	lude expenses paid for with non-cash government assistand value of such assistance and have included it on <i>Schedule</i> ficial Form 106l.)	ce if you know I: Your Income		Your exp	enses
4.	The rental or home ownership expenses for your residenc payments and any rent for the ground or lot.	e. Include first mortgag	e 4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	<ol> <li>Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as</li> </ol>	s home equity loops	4d. \$ 5. \$		0.00 0.00
J.	Additional mortgage payments for your residence, Such as	HOHE EUUILV IUAHS	J. J		v.uu

# Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 38 of 59

Debto	r 1 <b>Tiffany</b>	J. Abbott	Case num	ber (if known)	
6. U	Jtilities:				
-		y, heat, natural gas	6a.	\$	0.00
		ewer, garbage collection	6b.		0.00
		ne, cell phone, Internet, satellite, and cable services	6c.	·	0.00
	id. Other. S		6d.	·	0.00
_		sekeeping supplies	7.	· <u> </u>	194.00
		children's education costs	7. 8.	·	
-			o. 9.	·	0.00
		dry, and dry cleaning		·	0.00
		products and services	10.	·	0.00
		ental expenses	11.	\$	0.00
		n. Include gas, maintenance, bus or train fare.	12.	\$	0.00
	o not include	1 /		·	
		, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
		ntributions and religious donations	14.	<b>Description</b>	0.00
	nsurance.	incurrence deducted from your pay on included in lines 4 on 00			
		insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	5a. Life insu		15a.	·	0.00
	5b. Health in		15b.	· <u> </u>	0.00
	5c. Vehicle i		15c.		0.00
		surance. Specify:	15d.	\$	0.00
		include taxes deducted from your pay or included in lines 4 or 20.		_	
	Specify:		16.	\$	0.00
		lease payments:			
		nents for Vehicle 1	17a.	\$	0.00
1	7b. Car payr	nents for Vehicle 2	17b.	\$	0.00
1	7c. Other. Sp	pecify:	17c.	\$	0.00
1	7d. Other. Sp	pecify:	17d.	\$	0.00
3. Y	our payment	s of alimony, maintenance, and support that you did not report as	<u> </u>		
		your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
). <b>C</b>	Other paymen	ts you make to support others who do not live with you.		\$	0.00
S	Specify:		19.		
		perty expenses not included in lines 4 or 5 of this form or on Scho	edule I: Yo	our Income.	
2	0a. Mortgage	es on other property	20a.	\$	0.00
2	0b. Real esta	ate taxes	20b.	\$	0.00
2	0c. Property	, homeowner's, or renter's insurance	20c.	\$	0.00
		ance, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.		0.00
	Other: Specify:			+\$	0.00
	other. Specify.	•		φ	0.00
<u>2</u> . C	Calculate your	monthly expenses			
2	2a. Add lines	4 through 21.		\$	194.00
2	2b. Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		2a and 22b. The result is your monthly expenses.		\$	104.00
	.20. Add IIIIC Z	za ana zzo. The result is your monthly expenses.		Ψ	194.00
3. <b>C</b>	Calculate your	monthly net income.			
2	3a. Copy line	e 12 (your combined monthly income) from Schedule I.	23a.	\$	194.00
		ur monthly expenses from line 22c above.	23b.	·	194.00
_	) 0	, I			10-1100
2	3c. Subtract	your monthly expenses from your monthly income.			
_		It is your monthly net income.	23c.	\$	0.00
	5.050	, ,		-	
4. D	o you expect	an increase or decrease in your expenses within the year after you	ou file this	s form?	
F	or example, do	you expect to finish paying for your car loan within the year or do you expect you			or decrease because o
		e terms of your mortgage?			
	No.				
Г	☐ Yes.	Explain here:			

# Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 39 of 59

Fill in this infor	rmation to identify your	case:			
Debtor 1	Tiffany J. Abbott				
Debioi 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
· You must file th obtaining mone	is form whenever you fi	n connection with a bank	or amended schedules	s. Making a false stateme	ent, concealing property, or or imprisonment for up to 20
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				otcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules file	ed with this declaration a	and
X /s/ Tiff	fany J. Abbott		X		
	y J. Abbott		Signature of	f Debtor 2	
Signati	ure of Debtor 1				
Date	May 9, 2016		Date		

# Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 40 of 59

First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
uptcy Court for the:	NORTHERN DISTRICT OF ILLII	NOIS	
			☐ Check if this is an amended filing
<u>∩ 107</u> f Financial A	ffairs for Individuals	s Filing for Bankruptcy	12/1
e space is needed, a Answer every quest	ttach a separate sheet to this for ion.	rm. On the top of any additional pages	
		Before	
urrent maritai status	·		
_			
3 years, have you li	ved anywhere other than where	you live now?	
Il of the places you live	ed in the last 3 years. Do not include	de where you live now.	
Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there
Address: nd Rd. :2526		Debtor 2 Prior Address:  ☐ Same as Debtor 1	
nd Rd.	lived there From-To: March 2014	_	lived there ☐ Same as Debtor 1
	n 107  f Financial A  accurate as possib e space is needed, a Answer every quest ails About Your Mari urrent marital status  d  3 years, have you lit	f Financial Affairs for Individuals accurate as possible. If two married people are filing a space is needed, attach a separate sheet to this for Answer every question.  ails About Your Marital Status and Where You Lived current marital status?  d  3 years, have you lived anywhere other than where	f Financial Affairs for Individuals Filing for Bankruptcy accurate as possible. If two married people are filing together, both are equally responsible space is needed, attach a separate sheet to this form. On the top of any additional pages, Answer every question.  ails About Your Marital Status and Where You Lived Before current marital status?

Official Form 107

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main

Page 41 of 59
Case number (if known) Document Debtor 1 Tiffany J. Abbott

Par	t 2	Exp	lain t	he Sources	of You	r Income			
4.	Fill i	n the to	otal a	mount of inc	ome yo	nployment or from operatir u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
		No							
		Yes. I	Fill in	the details.					
						Debtor 1		Debtor 2	
						Sources of income	Gross income	Sources of income	Gross income
						Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
				current yea or bankrupt		☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
						☐ Operating a business		☐ Operating a business	
		calend y 1 to		ear: mber 31, 20	15)	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
						☐ Operating a business		☐ Operating a business	
				ear before th mber 31, 20		■ Wages, commissions, bonuses, tips	\$8,682.24	☐ Wages, commissions, bonuses, tips	
						☐ Operating a business		☐ Operating a business	
		No		the details.	SS INCC	me from each source separa	tery. Do not include income t	nat you listed in line 4.	
						Debtor 1		Debtor 2	
						Sources of income Describe below	Gross income (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Par	t 3:	List	Certa	ain Payment	ts You	Made Before You Filed for	Bankruptcy		
<b>).</b>	Are □	No.	Neit indiv	her Debtor 1 ridual primari ng the 90 day No. Go to Yes List by paid not in ubject to adju tor 1 or Deb ng the 90 day No. Go to	I nor D ly for a ys before line 7 pelow e that crunclude ustment tor 2 o ys before poline 7	personal, family, or househoure you filed for bankruptcy, do to be ach creditor to whom you pareditor. Do not include payment payments to an attorney for to the condition of th	umer debts. Consumer debtald purpose."  id you pay any creditor a total  id a total of \$6,225* or more into the for domestic support oblighis bankruptcy case.  Is after that for cases filed on the formulation in the formul	n one or more payments and the lations, such as child support a or after the date of adjustment	he total amount you and alimony. Also, do
				inclu	de pay			port and alimony. Also, do not i	

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Page 42 of 59
Case number (if known) Document

Debtor 1 Tiffany J. Abbott

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
7.	Within 1 year before you filed for bankruptour Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any gen control, or owner of 20% (	neral partners; partners partners	erships of which yo g securities; and ar	u are a general ny managing ag	partner; corporations ent, including one for
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi  No Yes. List all payments to an insider		yments or transfer a	any property on a	ccount of a deb	ot that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include creditor	
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes.  No Yes. Fill in the details.	cases, small claims action	s, divorces, collectic	on suits, paternity a	ctions, support o	or custody
	Case title Case number	Nature of the case	Court or agency		Status of the	case
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below  No Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		foreclosed, garnis	hed, attached,	seized, or levied?  Value of the property
		Explain what happene	d			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.		cluding a bank or fi	nancial institution	, set off any an	nounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date a taken	action was	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or ar  ■ No □ Yes		erty in the possess	ion of an assigne	e for the benefi	t of creditors, a

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main

Page 43 of 59
Case number (if known) Document Debtor 1 Tiffany J. Abbott

Pa	tt 5: List Certain Gifts and Contributions			_
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more the	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	cy, did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity
	Yes. Fill in the details for each gift or cont	ribution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupto or gambling?  ■ No □ Yes. Fill in the details.	y or since you filed for bankruptcy, did you lose anyt	thing because of the	it, fire, other disaster,
		escribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	loss	lost
Pa	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pre	y, did you or anyone else acting on your behalf pay oparing a bankruptcy petition?  Parers, or credit counseling agencies for services required		rty to anyone you
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	transferred	or transfer was made	payment
	Urgent Credit Counseling 10121 SE Sunnyside Rd., Ste. 300 Clackamas, OR 97015	\$16.00; Pre-bankruptcy credit counseling	February 2016	\$16.00
	Jeffrey A. Bivens, P.C. 4855 E. State St. Rockford, IL 61108	Debtor has paid \$795.00 for Chapter 7 legal services	March 2016	\$795.00
17.	promised to help you deal with your creditor Do not include any payment or transfer that you No Yes. Fill in the details.  Person Who Was Paid	u listed on line 16.  Description and value of any property	Date payment	Amount of
	Address	transferred	or transfer was made	payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Case 16-81160 Page 44 of 59 Case number (if known) Document

Debtor 1 Tiffany J. Abbott

	transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No  Yes. Fill in the details.	nade as security (such as	the granting of a	security inter	rest or mortgage on your	property). Do not
	Person Who Received Transfer Address	Description and v		paymen	e any property or its received or debts exchange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		ny property to a	self-settled	trust or similar device	of which you are a
	Name of trust	Description and	value of the prop	erty transfe	erred	Date Transfer was
						made
Pa	t 8: List of Certain Financial Accounts, In	struments, Safe Deposi	it Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market,	•				
	houses, pension funds, cooperatives, asso No Yes. Fill in the details.				,	, •
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	1	Date account was closed, sold, moved, or transferred	Last balance before closing o transfe
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, an	y safe depo	sit box or other depos	itory for securities,
	No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe th	ne contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1	year before	you filed for bankrupto	<del>с</del> у
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe th	ne contents	Do you still have it?
Pa	t 9: Identify Property You Hold or Contro	I for Someone Else				
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any propert	y you borro	wed from, are storing f	for, or hold in trust
	No No					
	Yes. Fill in the details.	MII		D !! :		.,
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)		Describe th	e property	Value
Pai	t 10: Give Details About Environmental Inf	formation				

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 45 of 59

Debtor 1 Tiffany J. Abbott

regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Date of notice Environmental law, if you Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Name **Case Number** case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name Employer Identification number** Describe the nature of the business Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below.

Part 12: Sign Below

Name

Address

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Date Issued

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

(Number, Street, City, State and ZIP Code)

Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document

Page 46 of 59
Case number (if known) Debtor 1 Tiffany J. Abbott

with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Tiffany J. Abbott Signature of Debtor 2 Tiffany J. Abbott Signature of Debtor 1 Date Date May 9, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

## Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 47 of 59

Fill in this info	rmation to identify your	case:		
Debtor 1	Tiffany J. Abbott			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
you are an inc	dividual filing under cha	oter 7, you must fill out t	ials Filing Under	•
creditors ha	ve claims secured by yo	ur property, or		
You must file th	ever is earlier, unless th	ithin 30 days after you fi	le your bankruptcy petition or l	by the date set for the meeting of creditors, it copies to the creditors and lessors you list
	people are filing together and date the form.	in a joint case, both are	equally responsible for supply	ring correct information. Both debtors must
	and accurate as possib your name and case nur		led, attach a separate sheet to t	this form. On the top of any additional pages
Part 1: List	Your Creditors Who Have	e Secured Claims		
. For any credi	•	art 1 of Schedule D: Cred	litors Who Have Claims Secure	d by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 48 of 59

Debtor 1	Tiffany J. Abbott	Case number (if known)	
name:		<ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul>	☐ Yes
Descrip	otion of	Reaffirmation Agreement.	
propert securin		☐ Retain the property and [explain]:	_
For any ui	rmation below. Do not list real esta-	perty Leases lat you listed in Schedule G: Executory Contracts and Unexpired te leases. Unexpired leases are leases that are still in effect; the perty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property I	eases	Will the lease be assumed?
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		□ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		□ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:	in or reased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have hat is subject to an unexpired lease	indicated my intention about any property of my estate that sec	cures a debt and any personal
	iffany J. Abbott	X	
	any J. Abbott ature of Debtor 1	Signature of Debtor 2	
Date	May 9, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81160 Doc 1 Filed 05/10/16 Entered 05/10/16 15:27:22 Desc Main Document Page 53 of 59

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In r	re Tiffany J. Abbott		Case No	<b>)</b> .	
		Debtor(s)	Chapter		
1	DISCLOSURE OF COMPE			` ,	that
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy of or in connection with the ba	, or agreed to be pankruptcy case is as	id to me, for service	
	For legal services, I have agreed to accept			795.00	
	Prior to the filing of this statement I have received	1	<b></b> \$	795.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	npensation with any other persor	unless they are me	mbers and associate	es of my law firm.
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name of the agreement.				ıy law firm. A
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankrupto				case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and rend</li><li>b. Preparation and filing of any petition, schedules, sta</li><li>c. Representation of the debtor at the meeting of credi</li></ul>	atement of affairs and plan whic	h may be required;	-	ankruptcy;
	<ul> <li>d. [Other provisions as needed]         Negotiations with secured creditors to reaffirmation agreements and applications of the second secon</li></ul>	ions as needed; preparation			
б.	By agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d redemptions, appeals, or any other adv	ischargeability actions, jud		nces, relief from s	stay actions,
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement fo	r payment to me for	r representation of th	ne debtor(s) in
1	May 9, 2016	/s/ Jeffrey A. Biv	ens		
Date		Jeffrey A. Biven			
		Signature of Attorn <b>Jeffrey A. Biven</b>			
		4855 E. State St.			
		Rockford, IL 611 (815) 399-2299			
		Name of law firm	·		

#### United States Bankruptcy Court Northern District of Illinois

In re	Tiffany J. Abbott	<b>P.</b> L. ()	Case No.	
	VER	Debtor(s)  RIFICATION OF CREDITOR M.	Chapter 7  ATRIX	
		Number of	Creditors:	41
	The above-named Debtor(s) h (our) knowledge.	nereby verifies that the list of credite	ors is true and correct to t	he best of my
Date:	May 9, 2016	/s/ Tiffany J. Abbott Tiffany J. Abbott Signature of Debtor		

AT&T PO Box 8212 Aurora, IL 60572

AT&T c/o Enhanced Recovery P.O. Box 57547 Jacksonville, FL 32241

AT&T c/o Diversified Recovery P.O. Box 551268 Jacksonville, FL 32255

Atul Sheth MD 301 W. Dakota St. Spring Valley, IL 61362

Cash Store 5259 IL Rt. 251, Ste. 5 Peru, IL 61354

Chase Home Finance, LLC 3415 Vision Dr. Columbus, OH 43219

Check Into Cash 1002 Shooting Park Peru, IL 61354

Citibank 100 Citibank Drive San Antonio, TX 78245

Citibank c/o Midland Funding 8875 Aero Drive, Ste. 200 San Diego, CA 92123

Collection Professionals, Inc. 723 - 1st St. La Salle, IL 61301

Comcast 2508 W. Rte. 120 Mchenry, IL 60050

Comcast c/o Convergent Recovery Outsourcing P.O. Box 9004 Renton, WA 98057

Dan Abbott c.o IDOC 2268 E. Morton Ave. Jacksonville, IL 62651

Dan Abbott 2268 E. Morton Ave. Jacksonville, IL 62650

Discover Greenwood Trust P.O. Box 6000 Dover, DE 19903

Discover PO Box 30395 Salt Lake City, UT 84130-0395

Discover P.O. Box 689 Sandy, UT 84091-0689

Dr. Cote 710 Peoria St. Peru, IL 61354

Dr. Kunkle 1723 - 10th St. Peru, IL 61354

Dr. O'Connell 206 Marquette St. La Salle, IL 61301 Dr. Sheth 301 W. Dakota St. Spring Valley, IL 61362

Home Town National Bank 105 Marquette St. #461 La Salle, IL 61301

Illinois Valley Community Hospital 925 West St. Peru, IL 61354

Illinois Valley Community Hospital c/o Collection Professionals, Inc. PO Box 416 La Salle, IL 61301

Illinois Valley ENT 920 West St., Ste. 113 Peru, IL 61354

Illinois Valley ENT c/o Credit Discount 415 E. Main St. Streator, IL 61364

IVCH Fast Care 5307 Rt. 251 Peru, IL 61354

Med 1 c/o State Collection Service P.O. Box 6250 Madison, WI 53716-0250

Midland Funding LLC 8875 Aero Dr., Ste. 200 San Diego, CA 92123

OSF Health Care 530 NE Glen Oak Ave. Peoria, IL 61656-1712 Ottawa Medical Center 1614 E. Norris Drive Ottawa, IL 61350

Ottawa Township High School 211 E. Main St. Ottawa, IL 61350

Prairie State Pulmonary 20303 Crawford Ave. Olympia Fields, IL 60461

Prairie State Pulmonary c/o Merchants Credit Association 223 W. Jackson St., Ste. 900 Chicago, IL 60606

Progressive Insurance Co. 6300 Wilson Mills Rd. Mayfield Village, OH 44143

Spring Valley Medical Clinic 600 E. First St Spring Valley, IL 61362

Spring Valley Medical Clinic c/o AFNI 1310 Martin Luther King Dr. Bloomington, IL 61702

St. Elizabeth Hospital 1100 E. Norris Drive Ottawa, IL 61350

St. Elizabeth Hospital c/o AFNI P.O. Box 3097 Bloomington, IL 61702

St. Margarets Hospital 600 E. First St. Spring Valley, IL 61362

Stacy & Tim Schomer 10234 County Line Rd. Newark, IL 60541